



Feidhmeannacht na Seirbhíse Sláinte  
Health Service Executive

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Dear Deputy O'Reilly,

The Health Service Executive has been requested to reply directly to you in the context of the following parliamentary question, which was submitted to this department for response.

#### **PQ 10947/20**

*To ask the Minister for Health the status of the implementation of the National Neurorehabilitation Strategy to develop neurorehabilitation services from acute, post-acute and community services nationally; the funding allocated to the strategy to date; the funding required to implement the strategy; and if he will make a statement on the matter.*

#### **HSE Response**

The Neuro-rehabilitation Strategy Implementation Framework (IF) was launched in February 2019. The overarching aim of the Strategy is the development of neuro-rehabilitation services to improve patient outcomes by providing safe, high quality, person-centred neuro-rehabilitation at the lowest appropriate level of complexity. This must be integrated across the care pathway, and provided as close to home as possible or in specialist centres where necessary.

These services should be configured into population based managed clinical rehabilitation networks (MCRNs). The MCRN, while an effective model in a number of European countries, is a new concept in Ireland. MCRNs are recognised as having the potential to bring together an appropriate range of primary, secondary and tertiary services to ensure equitable provision of high quality and clinically effective services. Considering the scale of fundamental change proposed it was decided to advance a demonstrator project across CHO 6 & 7 (which includes Peamount Healthcare, the Royal Hospital in Donnybrook and the National Rehabilitation Hospital) ahead of National roll-out.

The learning from the demonstrator project will inform implementation of the Neuro-rehabilitation Strategy across each CHO.

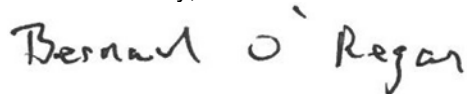
Work on developing the necessary operational structures to support Network Functioning across the demonstrator area continues and the 'design phase' of the model is at an advanced stage. Funding for a 10-bed Neurorehabilitation Unit at Peamount Hospital has also been approved. Recruitment for this unit is currently underway and it is hoped that the unit will be operational by Q3 2020.

The capital project at the National Rehabilitation Hospital is also nearing completion and will be operational within the coming weeks. The new building has capacity for 120 patients which is an uplift of approximately 20 beds. Funding has also been approved for staffing to support this increased capacity.

In line with the current British Standards for Rehabilitation Medicine (BSRM) recommendations for specialist rehabilitation service provision in Ireland and in keeping with the hub and spoke model outlined in the Neurorehabilitation Strategy, there is a need for the development of at least 60 beds per million population for specialist in-patient rehabilitation medicine i.e. 288 for Irish population. The cost of staffing a 20-bed inpatient unit, based on BSRM recommended staffing ratios is € 4,116,717 – including non-pay costs. This figure would need to be multiplied by approximately 14.5 to give the figure for the required 288 beds. This figure does not take in to account capital costs. Again, it is important to note that this is the figure for introducing a whole new service – i.e. with no reconfiguration of existing staff.

Recommended staffing ratios for the provision of community neurorehabilitation services are also adapted from the recommendations by the British Society of Rehabilitation Medicine (BSRM). These are the ratios recommended within the recently published Model of Care of the National Clinical Programme for Rehabilitation Medicine. The BSRM ratios are given per population of 1 million. These figures have been adapted based on population per CHO so specific staffing numbers may vary across CHOs depending on population. The cost of a new community neurorehabilitation team serving a population of approx 500,000, including non pay costs would be €5,180,609. Again, this does not take in to account any reconfiguration of existing staff, nor does it include any potential capital costs.

Yours sincerely,



**Bernard O'Regan,**  
**Head of Disability Strategy and Planning**